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**FACSIMILE TRANSMISSION**

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| TO:  | Commissioner for Patents<br>Alexandria, VA 22313-1450                            |
| ATTENTION:                                   | Examiner: Sharma, Rashmi K, Group Art Unit: 3651                                 |
| FAX-NO.:                                     | (703) 872-9306   |
| FROM:  | Henry M. Feiereisen, Reg. No.: 31,084  |
| APPL. NO.                                    | 10/721,517   |
| FILED:                                       | November 25, 2003  |
| DOCKET NO.:                                  | BRIXIUS-5  |
| TYPE OF PAPER:                               | <b>RESPONSE TO OFFICIAL ACTION dated April 7, 2005 and<br/>CHANGE OF ADDRESS</b> |
| DATE:  | July 5, 2005   |
| NO. OF PAGES (including this page): 16 pages |  |
| MESSAGE: DELIVER DIRECTLY TO EXAMINER        |  |

**CERTIFICATION OF FACSIMILE TRANSMISSION**

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office, Alexandria, VA 22313-1450 on the date shown below.

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**PATENT****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Docket No.: BRIXIUS-5

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|  |                               |
|--|-------------------------------|
| In re Application of:  | )                             |
| WOLFGANG BRIXIUS et al.  | ) Examiner: Sharma, Rashmi K. |
| Appl. No.: 10/721,517  | )                             |
| Filed: November 25, 2003   | ) Group Art Unit: 3651        |
| For: TRANSPORT SYSTEM FOR ARTICLES,<br>IN PARTICULAR CONTAINERS FOR<br>BAGGAGE PIECES, AND CONTROL<br>METHOD FOR THE TRANSPORT<br>SYSTEM | )                             |

**RESPONSE TO OFFICIAL ACTION**  
dated April 7, 2005

MAIL STOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

SIR:

This communication is in response to the Official Action of April 7, 2005, having a shortened period for response terminating July 7, 2005.

The Commissioner is hereby also authorized to charge any fees which may be required during the pendency of this application, including any patent application processing fees under 37 C.F.R. 1.17, and any filing fees under 37 C.F.R. 1.16, including presentation of extra claims, or credit any overpayment to Deposit Account No: 06-0502.

Please amend the above-entitled application as follows: